

Update on the Accreditation Handbook

August 2009

Overview of this Report

This report provides an update on the work to revise the *Accreditation Handbook* for discussion and input. The item contains three chapters that were updated by staff to include edits identified by COA members at the August meeting and to reflect implementation of the revised accreditation system during the 2009-10 year and thereafter.

Staff Recommendation

Staff recommends that the COA discuss and adopt the proposed changes to Chapter 8: Accreditation Decision Options, Chapter 9: Follow Up, and Chapter 10: Accreditation Site Visit Team Information. Staff, furthermore, recommends that the COA direct staff to post the adopted Chapters 8, 9, and 10 and bring additional updated chapters of the Handbook to the January 2010 COA meeting for approval.

Proposed Changes to Three Chapters of the Accreditation Handbook

During the May 2009 COA meeting, members and staff discussed the need to update the *Accreditation Handbook* to reflect the revised accreditation system. The COA directed staff to prepare one or more chapters for COA review and adoption at each subsequent meeting until the entire Handbook was updated and adopted. Edits for chapters 8, 9, and 10 were identified that conform the chapters to current accreditation practices so that the chapters will be useful for accreditation review teams as they consider accreditation decision options (chapter 8), for institutions as they prepare to respond to a COA accreditation decision (chapter 9), beginning in the Fall of 2009-10, and for members of accreditation site teams as they participate in accreditation activities (chapter 10).

The revised Chapters 8, 9, and 10 are attached to the item. Staff considered showing the proposed edits as track changes, but realized that including the track changes made the documents very hard to read. Members are referred to Item 18 from the May 2009 agenda if they wish to see the original versions of the chapters.

As requested, staff edited Chapter 8 to ensure that the “Operational Implications” and “Removal of Stipulations” sections for each type of accreditation decision were consistent. While completing this task, staff modified the format to more clearly identify the additional task(s) required with each progressively more serious accreditation decision.

In several places, staff proposes wording changes. Those instances are shown in **bold**.

Regarding Chapter 8, COA members identified the need for greater guidance for accreditation site teams for determining when to recommend a stipulation. Staff proposes the language, in bold, that was added to page 3.

Staff proposes modified language for describing the level of certainty with which a CTC consultant can determine that an institution has remedied deficiencies through review of the 7th

year report; e.g., **appear to have been addressed** The former language implied that the consultant would be able to determine definitively whether the deficiencies had been adequately addressed simply by reviewing the report. Consistent with the new accreditation system, document reviews are considered to provide “preliminary” assurance that standards are met. Only a site visit can verify that changes described in a report, even when documentation has been provided, have become operationalized.

In the *Accreditation with Major Stipulations* section, the COA asked whether the *Accreditation Framework* permitted the COA to adopt an *Accreditation with Probationary Stipulations* if an institution with an *Accreditation with Major Stipulations* status could not demonstrate that it had made significant progress in removing the deficiencies identified in the initial accreditation decision. The *Accreditation Framework* does not prohibit this option.

As requested, Table 1 from Chapter 9 was moved to Chapter 8. Staff recommends that the table be situated early in Chapter 8 to support the narrative rather than at the end of Chapter 8 as suggested during the August COA meeting.

Next Steps

Consistent with directions provided to staff at the May 2009 COA meeting, staff will continue to revise chapters in the *Accreditation Handbook* and will bring proposed revised chapters to the COA for its approval at future COA meetings.

Chapter Eight

Accreditation Decisions: Options and Implications

Introduction

This chapter presents the accreditation decision options that are available for accreditation teams to recommend to the COA and for the COA to render. In addition, this chapter explains the implications of each of the possible accreditation decision. This chapter is intended for use by institutions, team members, team leads, and the COA.

I. Accreditation Decision Options

At the conclusion of the site visit, the accreditation review team makes a recommendation about the accreditation status of the institution. This recommendation is included in the team report and must be supported by the team's findings on standards. The COA, after reviewing the team report, hearing from the team lead, consultant, and institutional representatives, adopts the team report and renders an accreditation decision. The possible options for accreditation decisions are as follows:

- Accreditation
- Accreditation with Stipulations
- Accreditation with Major Stipulations
- Accreditation with Probationary Stipulations
- Denial of Accreditation (available only after a revisit).

Below are definitions for each of the accreditation decisions followed by the operational implications of each of the options. When the COA reviews a team's accreditation report, they will consider two types of **standards findings** identified by the team. The first will be shown as Common Standards or program standards that are "not met" or that are "met with concerns." **The second are** statements ("stipulations") that describe what an institution must do to meet a standard that is **substantially "not met" and that, because of its significant impact on the quality of candidate preparation, prevents the institution from being recommended for accreditation.** The stipulations are conditions that must be satisfied before the COA can grant an accreditation decision of *Accreditation*. Table 1 identifies the possible follow-up activities that may be required in the COA's accreditation decision.

Accreditation

The recommendation of *Accreditation* means that the accreditation team verified that the institution and its programs, when judged as a whole, met or exceeded the CTC's adopted Common Standards and the program standards applicable to the institution. The institution (including its credential programs) is judged to be effective in preparing educators and is demonstrating overall quality in its programs and general operations. The status of *Accreditation* can be achieved even if one or two common standards were identified as "met with concerns" or one or more areas of concern were identified within its credential programs.

Operational Implications

An institution that receives the status of *Accreditation* **must**:

- Participate in the accreditation activities required of its assigned cohort, which are Biennial Reports, Program Assessment, and Site Visits (see Table 1).
- Respond to all concerns identified in the adopted accreditation team report or specified in the COA action. This follow up may take place in the Biennial Report or in a seventh year follow up report, as determined by the COA.
- Abide by all CTC and state regulations.

An institution that receives the status of *Accreditation may*:

- Continue all accredited credential programs and propose new credential programs to the COA at any time.
- Indicate in all publications and documents that it is accredited by the CTC.

The COA will note the accreditation status in the Committee's annual report to the CTC on Teacher Credentialing. The report of the accreditation team and the action taken by the COA will be posted on the CTC's website.

Table 1: Requirements the COA may impose as follow-up activities

Institution Actions Following an Accreditation Site Visit	Accreditation (✓ Indicates a possible follow-up activity)			
	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations
No required follow-up beyond the routine accreditation activities, i.e. Biennial Reports and Program Assessment.	✓			
Submit <i>Seventh Year Follow-up Report</i> addressing all identified area(s) of concern and/or questions.	✓			
Submit <i>Seventh Year Follow-up Report</i> addressing all stipulation(s), identified area(s) of concern and/or questions.		✓	✓	✓
Provide addendum to biennial report and program assessment documents addressing all stipulation(s), identified area(s) of concern and/or questions.			✓	✓
Submit periodic Follow-up Reports (30 days, 90 days, as determined by the COA) to ensure that appropriate action			✓	✓

Institution Actions Following an Accreditation Site Visit	Accreditation (✓ Indicates a possible follow-up activity)			
	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations
is being taken in a timely manner.				
Re-visit by CTC staff and team leader.		✓	✓	✓
Re-visit by CTC staff, team lead, and 1 or more team members.			✓	✓
Institution notifies all current and prospective candidates of the institution's accreditation status.			✓	✓
Institution is prohibited from accepting new candidates in one or more programs until the stipulations have been removed..				✓
Institution is prohibited from proposing new programs until the stipulations have been removed.				✓

Accreditation: Accreditation with Stipulations

The recommendation of *Accreditation with Stipulations* means that the accreditation team verified that the institution and some of its programs have “not met” or “met with concerns” some common standards and/or program standards, applicable to the institution, and that action is required to address these deficiencies. The institution is judged to be generally effective in preparing educators and in its general operations apart from the identified areas of concern. The concerns or problems identified are confined to specific issues that minimally impact the quality of the program received by candidates or completers.

Operational Implications

An institution that receives the status of *Accreditation with Stipulations* **must:**

- Participate in the accreditation activities required of its assigned cohort, which are Biennial Reports, Program Assessment, and Site Visits.
- Respond to all concerns identified in the adopted accreditation team report and all stipulations specified in the COA action, and submit, within one year, a written seventh year report with appropriate documentation that demonstrates how all concerns and stipulations have been addressed.
- Abide by all CTC and state regulations.

An institution that receives the accreditation status of *Accreditation with Stipulations* **may**:

- Continue all accredited credential programs and propose new credential programs to the COA at any time.
- Indicate in all publications and documents that it is accredited by the CTC.

The COA will note the accreditation status in the Committee's annual report to the CTC on Teacher Credentialing. The report of the accreditation team and the action taken by the COA will be posted on the CTC's website.

Removal of Stipulations

The institution must respond to all concerns identified in the adopted accreditation team report and all stipulations placed on it by action of the COA. This is done by preparing a written seventh year report for submission to the CTC consultant within one calendar year of the visit. The seventh year report must contain documentation demonstrating that all concerns and stipulations have been addressed. Typically, the CTC consultant, in consultation with the team lead assigned to the original visit, will review the report, **ensure that all instances of deficiencies appear to have been addressed in the institution's response**, analyze progress made by the institution in meeting **any standards that do not appear to be fully addressed in the report**, and make a recommendation to the COA regarding the removal of the stipulations. In rare instances, the COA may require a revisit by the CTC consultant or the team lead.

The COA may act to remove the stipulations and change the status of the institution from *Accreditation with Stipulations* to *Accreditation*.

The COA will note the change in accreditation status in the Committee's annual report to the CTC. The report and the action taken by the COA will be posted on the CTC's website.

Accreditation with Major Stipulations

The recommendation of *Accreditation with Major Stipulations* means that the accreditation team concluded that the institution and some of its programs have "not met" or "met with concerns" multiple standards in the common standards, and/or program standards applicable to the institution, or that the team found areas of concern (such as matters of curriculum, field experience, or candidate competence) that impact, or are likely to impact, the preparation of credential program candidates. The team identified issues that impinge on the ability of the institution to deliver high quality, effective programs. The review team may have found that some of the institution's credential programs are high quality and effective in preparing educators or that the general operations of the institution are adequate, but the team concluded that these areas of quality do not outweigh the identified areas of concern.

Operational Implications

An institution receiving a recommendation of *Accreditation with Major Stipulations* **must**:

- Participate in the accreditation activities as required of its assigned cohort, which are Biennial Reports, Program Assessment, and Site Visits.
- Respond to all concerns identified in the adopted accreditation team report and all stipulations specified in the COA action, and submit, within one year, a written seventh

year report with appropriate documentation that demonstrates how all concerns and stipulations have been addressed.

- **Prepare for a focused revisit by the team lead and consultant and, as required, members of the accreditation team.**
- Work with the CTC consultant to plan the revisit that will address the concerns contained in the adopted team report and the stipulations placed upon it by the COA action.
- Abide by all CTC and state regulations.

An institution receiving a recommendation of *Accreditation with Major Stipulations* **may:**

- Continue all accredited credential programs and propose new credential programs to the COA at any time **which will be approved at the discretion of the COA.**
- Indicate in all publications and documents that it is accredited by the CTC.
- Be required to notify students of its accreditation status. The COA will determine whether student notification is required, and if so, whether all students or only students in particular credential programs are to be notified.
- Submit period reports if required by the COA accreditation action.

Removal of Stipulations

The institution must respond to all concerns identified in the adopted accreditation team report and all stipulations placed on it by action of the COA. This is done by preparing a written seventh year report for submission to the CTC Consultant within one calendar year of the visit. The seventh year report must contain documentation demonstrating that all concerns and stipulations have been addressed. Typically, the CTC consultant, in consultation with the team lead assigned to the original visit, will review the report, determine whether **all instances of deficiencies appear to have been addressed in the institution's response**, and analyze progress made by the institution in meeting **any standards that do not appear to be fully addressed in the report.**

The institution must also work with its CTC consultant to plan the revisit that will provide an opportunity for the CTC consultant and team lead to confirm that changes identified in the 7th year report are being implemented at the institution and that the institution has adequately addressed the concerns identified in the adopted accreditation report and the stipulations placed upon the institution by the action of the COA. The report of the revisit team will be submitted to, and acted upon by, the COA within one calendar year of the original visit.

The COA will review the revisit report and determine whether all stipulations and concerns have been addressed. If the COA determines that all stipulations and concerns have been corrected, the COA will act to remove the stipulations and change the status of the institution from *Accreditation with Major Stipulations* to *Accreditation*. If the COA grants the institution *Accreditation*, the institution will be permitted to continue all accredited credential programs and to propose new credential programs to the COA at any time. The revisit report of the team, the action of the COA to remove the stipulations, and the new accreditation decision will be posted on the CTC's website. The institution may then notify its constituency of its change of accreditation status as appropriate.

In the event the COA determines that the institution has not made significant progress on resolving the stipulations as evidenced in the 7th year report or verified by the CTC consultant and team lead at the revisit, the institution will be brought back to the COA for consideration of *Accreditation with Probationary Stipulations* or *Denial of Accreditation*.

On some occasions, significant progress may have been made, but additional time beyond one calendar year is needed for the institution to remedy all of the identified deficiencies. If this is the case, the COA may continue the current stipulations or adopt revised stipulations. When the COA adopts revised stipulations, it will do so as an *Accreditation with Stipulations* decision. In the same action, the COA will specify the amount of additional time the institution will have to address the remaining stipulations. In such cases, the COA may determine appropriate follow up by the institution and a timeline for COA action to remove the remaining stipulations and concerns.

Accreditation with Probationary Stipulations

The recommendation of *Accreditation with Probationary Stipulations* indicates that an accreditation team identified serious and pervasive deficiencies in the institution's implementation of the Common Standards and program standards applicable to the institution, or that the team found areas of concern (such as matters of curriculum, field experience, or candidate competence) that substantially impact the preparation of credential program candidates. The team identified issues that prevent the institution from delivering high quality, effective programs. The review team may have found that some of the institution's credential programs are effective in preparing educators and/or that its general operations are adequate, but the team determined that these areas of quality clearly do not outweigh the identified areas of concern.

Operational Implications

An institution receiving a recommendation of *Accreditation with Probationary Stipulations* **must:**

- Participate in the accreditation activities as required of its assigned cohort, which are Biennial Reports, Program Assessment, and Site Visits.
- Respond to all concerns identified in the adopted accreditation team report and all stipulations specified in the COA action, and submit, within one year, a written seventh year report with appropriate documentation that demonstrates how all concerns and stipulations have been addressed.
- **Prepare for a focused revisit by the team lead and consultant and, as required, members of the accreditation team.**
- Abide by all CTC and state regulations.
- Notify all students in all credential programs in writing of its accreditation status.
- Submit an action plan describing the institution's plan to address the stipulations and concerns.
- Provide updates at specified intervals, as determined by the COA.

An institution receiving a recommendation of *Accreditation with Probationary Stipulations* is permitted to continue all accredited credential programs for a period of one calendar year. The institution **may not:**

- Propose new programs of professional preparation or expand existing programs. .

An institution receiving a recommendation of *Accreditation with Probationary Stipulations* **may**:

- Continue all accredited credential programs for a period of one calendar year, although the COA may place limitations on particular programs.
- Be required to demonstrate to the COA satisfactory progress in addressing particular areas of interest, whether identified as stipulations or concerns, prior to one calendar year. This will be determined by the COA in its accreditation action.

The COA will note the accreditation status of the institution in the Committee's annual report to the CTC and the accreditation team report will be posted on the CTC's website as will the action taken by the COA.

Removal of Stipulations

The institution must respond to all concerns identified in the adopted accreditation team report and all stipulations placed on it by action of the COA. This is done by preparing a written seventh year report for submission to the CTC Consultant within one calendar year of the visit. The seventh year report must contain documentation demonstrating that all concerns and stipulations have been addressed. Typically, the CTC consultant, in consultation with the team lead assigned to the original visit, will review the report, determine whether **all instances of deficiencies appear to have been addressed in the institution's response**, and analyze progress made by the institution in meeting **any standards not fully addressed in the report**.

The institution must also work with its CTC consultant to plan the revisit that will provide an opportunity for the CTC consultant and team lead to confirm that changes identified in the 7th year report are being implemented at the institution and that the institution has adequately addressed the concerns identified in the adopted accreditation report and the stipulations placed upon the institution by the action of the COA. The report of the revisit team will be submitted to, and acted upon by, the COA within one calendar year of the original visit.

The COA will review the revisit report and determine whether all stipulations and concerns have been addressed. If the COA determines that all stipulations and concerns have been corrected, the COA will act to remove the stipulations and change the status of the institution from *Accreditation with Probationary Stipulations* to *Accreditation*. If the COA grants the institution *Accreditation*, the institution will be permitted to continue all accredited credential programs and to propose new credential programs to the COA at any time. The revisit report of the team, the action of the COA to remove the stipulations, and the new accreditation decision will be posted on the CTC's website. The institution may then notify its constituency of its change of accreditation status as appropriate.

In the event that the revisit team determines that the institution has not made significant progress in addressing the stipulations according to the timeline set by the COA, a recommendation of *Denial of Accreditation* will be made to the COA.

On some occasions, significant progress may have been made, but additional time beyond one calendar year is needed for the institution to remedy all of the identified deficiencies. If this is the

case, the COA may continue the current stipulations or adopt revised stipulations. When the COA adopts revised stipulations, it will do so as an *Accreditation with Stipulations* decision. In the same action, the COA will specify the amount of additional time the institution will have to address the remaining stipulations. In such cases, the COA may determine appropriate follow up by the institution and a timeline for COA action to remove the remaining stipulations and concerns.

Denial of Accreditation

The COA would deny accreditation only if an accreditation team, upon conducting a revisit to an institution that received major or probationary stipulations, finds that the stipulations have not been adequately addressed or remediated, or determines that significant and sufficient progress has not been made towards addressing the stipulations. If an accreditation team finds that: (a) sufficient progress has been made, and/or (b) special circumstances described by the institution justify a delay, the COA may, if requested by the institution, permit an additional period of time for the institution to remedy its severe deficiencies. If the COA votes to deny accreditation, all credential programs must close at the end of the semester or quarter in which the decision has taken place. In addition, the institution's institutional approval ceases to be valid at that time and the institution will no longer be a CTC approved program sponsor.

Operational Implications

An institution receiving *Denial of Accreditation* **must**:

- Take immediate steps to close all credential programs at the end of the semester or quarter in which the COA decision occurs.
- Announce that it has had its accreditation for educator preparation denied. All students enrolled in all credential programs must be notified that accreditation has been denied and that all programs will end at the end of the semester or quarter in which the COA decision occurs.
- File a plan of discontinuation within 90 days of the COA's decision. The plan must give information and assurances regarding the institution's efforts to place currently enrolled students in other programs or to provide adequate assistance to permit students to complete their particular programs.
- Upon the effective date of the closure of credential programs, as determined by the COA, remove from all institutional materials and website any statements that indicate that its programs are accredited by the CTC.

The revisit report of the team, the action of the COA, and the new accreditation decision will be posted on the CTC's website.

Furthermore, an institution receiving a *Denial of Accreditation* would be enjoined from re-applying for institutional approval for a minimum of two years.

Process of Re-applying for Initial Institutional Accreditation

If the institution were to wish to provide educator preparation programs at a future date, it would be required to make a formal application to the CTC for initial institutional approval. This would include the submission of a complete self study report including responses to the preconditions, common standards, and program standards. The self-study must show clearly

how the institution attended to all problems noted in the accreditation team revisit report that resulted in *Denial of Accreditation*. The CTC would make a decision on the status of the institution and would be made aware of the previous action of Denial of Accreditation by the COA. If the CTC grants initial institutional approval to the institution, the COA would review, and if appropriate, approve its programs. An accreditation site visit would be scheduled within two years to ensure the newly approved programs adhere to the Common and Program Standards.

II. *Guidance for the Team Recommendation*

The site visit team must use its collective professional judgment to reach an accreditation recommendation for an institution. The site visit team's recommendation for an accreditation decision is a holistic decision based on the common standard findings, and on the number and severity of "Met with Concerns" or "Not Met" findings for the specific programs offered at the institution.

The COA makes one accreditation decision for the institution and all of its approved educator preparation programs. This accreditation decision reflects, to a great degree, the team's findings on the common standards. However, if one or more programs are found to have significant issues, it is likely that one or more related common standards will reflect findings of 'Met with Concerns' or 'Not Met.'

The table below provides general guidance to site visit teams as they discuss which accreditation recommendation is appropriate for the institution.

General Guidance for Initial Site Visit Team Recommendations*

Common Standards Less than Fully Met		Range of Accreditation Recommendations				Denial of Accreditation
# Met with Concerns	# Not Met	Accreditation	with Stipulations	with Major Stipulations	with Probationary Stipulations	
0	0	•				Not a recommendation for an initial site visit. The recommendation of 'Denial of Accreditation' is considered only after a Revisit.
1-2	0	●—●				
1-2	1-2		●—●	●		
1-2	3-4			●—●	●	
3-4	0		●—●	●		
3-4	1-2		●—●	●—●	●	
3-4	3-4			●—●	●	
3-4	5+				•	
5+	0-2			●—●	●	
5+	3+				•	

* Findings on program standards must be considered by the team in making the accreditation recommendation, and those findings play an integral role in helping the team reach consensus on its recommendation

When teams are deliberating about the accreditation recommendation, they must consider the findings on the common standards, as well as the number and severity of standard findings for the programs. The table identifies the range of likely accreditation recommendations for an institution based on the number of common standards that are “Met with Concerns” or “Not Met.” If an institution has only a couple of common standards found to be ‘Met with Concerns’ or ‘Not Met,’ then the accreditation recommendation would likely be *Accreditation* or *Accreditation with Stipulations* which are on the left side of the range shown on the table. If on the other hand, there are a number of common standards found to be ‘Met with Concerns’ or ‘Not Met,’ then the team’s accreditation recommendation would likely be in the middle or towards the right side of the range identified above.

In its determination of an appropriate accreditation recommendation, the accreditation team must also take into consideration the number of educator preparation programs an institution offers. If an institution offers a small number of programs, then a small number of program standards found to be less than fully met becomes significant. On the other hand, if an institution offers a large number of programs, then a few program standards found to be less than fully met might not be as significant a factor in the accreditation recommendation.

The information provided in the table is only a general reference tool for teams as they consider the impact of the findings on all common and program standards to determine an accreditation recommendation. It does not replace the critically important professional judgment that team members bring to discussions about the *degree* to which an institution and its programs align with the adopted standards. Similarly, it does not replace the team’s assessment of the strengths and weaknesses of an institution and its programs, nor of the team’s judgment about the impact of the institution on candidates or the quality of the institution’s offerings. By the end of the site visit, team members have a great deal of information about an institution, its unique characteristics, and the quality of its programs. That knowledge, as supported by evidence, is used by the team to generate and justify an accreditation recommendation.

In like fashion, the table serves as a reference tool for the COA which must consider information from the accreditation report, the team lead, and the institution to render a single accreditation decision. The table is not a substitute for the professional judgment and experience of the COA members nor is it a substitute for the deliberations that take place at the COA meeting where the accreditation report is presented.

Chapter Nine

Follow-Up Activities

Introduction

Institutions' accreditation responsibilities do not end with the accreditation decision. Institutions have on-going responsibilities to attend to accreditation matters in the 7th year of the accreditation cycle. Depending on the accreditation decision, these activities can range from continuing routine accreditation activities, such as collection and analysis of candidate data, to major revisions of programs to bring them into alignment with state-adopted standards. The specific activities depend upon the issues identified by the review team and the accreditation decision rendered by the COA. Many, but not all, institutions will be required to submit a seventh year report. This chapter describes expectations for each of the follow-up activities the institution may be required to complete during the seventh year of the cycle and, if required, beyond.

I. Accreditation Decisions and Institution Follow-Up Activities

As described in the previous chapter, the COA can make one of five accreditation decisions. These include the following:

- Accreditation
- Accreditation with Stipulations
- Accreditation with Major Stipulations
- Accreditation with Probationary Stipulations
- Denial of Accreditation (available only after a revisit)

The previous chapter delineated the operational implications for each of the possible accreditation decisions. The table below summarizes some, but not all, of the required activities for each of the various accreditation decisions. The previous chapter should be consulted for specific information about the definition and operational implications of each accreditation decision. Ultimately, the specific actions required of any given institution in the seventh year will be set forth in the action taken by the COA.

Table 1, below, summarizes the general expectations related to the typical seventh year of the accreditation cycle. The seventh year of the accreditation cycle is critical for achieving the purposes of accreditation (ensuring accountability, ensuring quality programs, adherence to standards, and fostering program improvement). Not only does the current system require that the institution act in a timely manner to address issues identified during the accreditation review, it assumes that all institutions will engage in on-going program improvement supported by the cycle of accreditation activities.

Institutions for which stipulations were assigned by the COA must take action to address the stipulations in one calendar year. For this reason, the activities undertaken in the seventh year are particularly critical. Institutions with *Major Stipulations* or *Probationary Stipulations* that do not sufficiently address the stipulations could be faced with *Denial of Accreditation*.

Institutional Requirement for the Seventh Year Report

The following table provides an overview of follow-up activities institutions must complete during the seventh year. More detailed information is provided in Table 2.

Table 1: Accreditation Decision and Possible Required Follow-Up Activities

Activity	Accreditation	Accreditation with Stipulations	Accreditation with Major and Probationary Stipulations
Report Submitted to CTC	COA discretion	Yes	Yes
Type of Report	One of two options for reporting response to concerns as determined by COA: 1) Seventh Year Report 2) Biennial Report (due to CTC following year 2)	Seventh Year Report	Seventh Year Report
To be addressed in Report	(If required by COA) * Standards Not Met (if applicable) * Standards Met with Concerns (if applicable) Any other areas included in COA action at the time the accreditation decision is made.	* All Stipulations * Standards Not Met (if applicable) * Standards Met with Concerns (if applicable) Any other areas included in COA action at the time the accreditation decision is made.	* All Stipulations * Standards Not Met (if applicable) * Standards Met with Concerns (if applicable) Any other areas included in COA action at the time the accreditation decision is made.
Review Process	CTC staff reviews report and informs the COA whether areas to be addressed were adequately documented.	<u>If no revisit is required:</u> CTC staff reviews report and informs the COA whether areas to be addressed were adequately documented. <u>If revisit is required:</u> Revisit team reviews report and information collected during the revisit to make new standards findings (if appropriate) and determine whether sufficient progress has been made in addressing	Revisit team reviews report and information collected during the revisit to make new standards findings (if appropriate) and determine whether sufficient progress has been made in addressing stipulations. Progress is reported to the COA, which determines whether to remove stipulations and/or change accreditation status.

Activity	Accreditation	Accreditation with Stipulations	Accreditation with Major and Probationary Stipulations
		stipulations. Progress is reported to the COA, which determines whether to remove stipulations and change accreditation status.	

All Institutions in the Seventh Year

Institutional follow-up is required of all approved institutions in the seventh year of the cycle, although a follow-up *report* is not necessarily required of all institutions (see Table 1). In the seventh year of the cycle, all institutions are expected to address issues raised during the accreditation process by the review teams and the COA. This means taking action within the policies and procedures of the institution to rectify and/or address issues related to CTC adopted standards. If an institution has no specific issues identified by the review team and all standards were found to be met, the institution personnel will continue to review candidate assessment data and available program effectiveness data with the objective of program improvement.

Accreditation

The revised *Accreditation Framework* provides the COA with the flexibility to require follow-up regardless of the accreditation decision, including *Accreditation*. The COA may require institutions with *Accreditation* to provide a follow-up report that addresses how the institution is addressing standards “not met” or “met with concerns,” and the progress being made to address **any other issues raised in the report or identified in the accreditation action of the COA**. The COA has broad flexibility to request a follow-up report on any topic or issue identified as a **standard concern** in the accreditation report. The COA may require that the follow-up report be provided in a seventh year report, or be included as a separate page in the institution’s next biennial report. Any follow-up required must be identified by the COA in the action taken at the time of the accreditation decision.

Accreditation with Stipulations

Any institution granted *Accreditation with Stipulations* must complete a seventh year report as part of the accreditation review process. This report should address the action taken by the institution to address any stipulations as well as concerns identified with standards “not met” or “met with concerns.” In addition, the COA may require that the seventh year report address any other issue identified in the team report or raised during COA deliberations. All institutions with *Accreditation with Stipulations* must continue to work with the CTC consultant during the seventh year. In cases where the determination of *Accreditation with Stipulations* has been rendered, the COA will indicate whether the process for removal of stipulations must include a revisit to the institution.

No Revisit Required

In the cases where a revisit was not deemed necessary by the COA, the consultant, and in some cases the team lead, will review the responses provided in the seventh year report by the

institution. These responses will be summarized in an agenda item for the COA to consider in making its determination as to whether or not sufficient progress has been made to remove the stipulations. The COA will consider, at a regularly scheduled meeting, the recommendation of the CTC consultant and, if appropriate, the team lead in determining whether to remove stipulations. Institutional representatives should attend the meeting to ensure all questions and concerns of the COA are addressed as the members consider the removal of stipulations.

Required Revisit

If a site visit has been deemed necessary by the COA, it will occur approximately one year after the original site visit. The institution should continue working with its CTC consultant to plan for the revisit and to ensure common understanding of what is expected at the revisit. If the COA has determined that a revisit or a focused site visit is necessary, the seventh year report will be provided to the review team in advance of the visit to help the team's assessment of the progress being made in addressing the findings of the review. The CTC consultant will work with the institution to determine the specific revisit needs as directed by the COA action and help guide the institution in determining the type of evidence and progress expected at the time of the site visit.

Upon the conclusion of the revisit, the revisit team will determine whether the stipulations and standards deemed "not met" or "met with concerns" are now found to be met. A report of the revisit team will be provided to the COA and the COA, at one of its regularly scheduled public meetings, will discuss with the CTC consultant, team lead, and institutional representatives the institution's progress made in addressing the stipulations and concerns identified in the adopted accreditation report. If it is determined that sufficient progress has been made in meeting the standards, then the COA will remove the stipulations. If sufficient progress has not been made, the COA may change the accreditation decision and/or may impose additional stipulations with new timelines and expectations for compliance with the state adopted educator preparation standards.

Accreditation with Major Stipulations

Any institution granted *Accreditation with Major Stipulations* must complete a seventh year report as part of the accreditation review process. This report should address the action taken by the institution to address any stipulations as well as concerns associated with standards found to be "not met" or "met with concerns". In addition, the COA may require that the seventh year report address any other issues identified in the team report or raised during COA deliberations. This report will be used by the revisit team, along with any information collected during the revisit, to determine the progress being made in meeting the standards.

Required Revisit

In nearly all cases of *Accreditation with Major Stipulations*, a revisit to the institution will be required. This revisit should take place approximately one year after the original site visit. The COA will indicate in its action whether the revisit will be conducted by the staff consultant and team lead, or with a team. The size of the revisit team will largely depend on the number and type of stipulations and the number and type of programs with areas of concern identified.

During the seventh year, the institution should continue working with its CTC staff consultant to plan for the revisit and to ensure common understanding of what is expected at the revisit. A seventh year report must be provided by the institution which will, in turn, be provided to the review team to help the team's assessment of the progress being made in addressing the findings of the review. The CTC consultant will work with the institution to determine the specific revisit needs as directed by the COA decision and help guide the institution in determining the type of evidence and progress expected at the time of the site visit.

Upon the conclusion of the revisit, the revisit team will determine whether the stipulations and those standards deemed "not met" or "met with concerns" are now fully met. A report of the revisit team will be provided to the COA and the COA, at one of its regularly scheduled public meetings, will discuss with the staff consultant, team lead, and institutional representatives the progress made in addressing the standards. If it is determined that sufficient progress has been made in meeting the standards, then the COA may remove the stipulations. If sufficient progress has not been made, the COA may adopt a decision of *Denial of Accreditation*. If, in some cases, it determines that some progress has been made and it is appropriate to allow additional time for the institution to address the remaining stipulations, the COA could change the accreditation decision and/or may impose additional stipulations with new timelines and expectations for compliance with the state adopted educator preparation standards.

Accreditation with Probationary Stipulations

Like *Accreditation with Stipulations* and *Accreditation with Major Stipulations*, an institution given *Accreditation with Probationary Stipulations* is required to submit a seventh year report to document how it has addressed all stipulations and concerns. However, numerous additional requirements are imposed on an institution with *Accreditation with Probationary Stipulations* during that seventh year of the cycle.

Plan to Address Stipulations

A determination of *Accreditation with Probationary Stipulations* requires that the institution submit an action plan describing the steps the institution will take to address the stipulations and concerns and that it will provide updates at intervals determined by the COA. The COA determines the timeline for submitting the plan, but typically the plan must be submitted either 60 or 90 days after the COA meeting in which the COA has made the determination of *Accreditation with Probationary Stipulations*. The CTC consultant and the Administrator of Accreditation will determine the sufficiency of the plan and provide updates to the COA as appropriate.

Revisit

A revisit is required for any institution with *Accreditation with Probationary Stipulations*. This revisit should take place approximately one year after the original site visit. During the seventh year, the institution should continue working with its CTC consultant to plan for the revisit and to ensure a common understanding of what is expected at the revisit. A seventh year report must be provided by the institution which will, in turn, be provided to the review team to help the team's assessment of the progress being made in addressing the findings of the review. The CTC consultant will work with the institution to determine the specific revisit needs as directed

by the COA action and to help guide the institution in determining the type of evidence and progress expected at the time of the site visit.

The team lead, team members, and CTC consultant will participate in the revisit and provide a report to the COA about the progress that has been made in addressing standards. The report will include an updated decision on standards findings. The COA will make a determination whether sufficient progress has been made to remove the stipulations and change the accreditation decision. If the COA determines that sufficient progress has not been made, it could render a decision of *Denial of Accreditation*.

If, in some cases, it determines that some progress has been made and it is appropriate to allow additional time for the institution to address the remaining stipulations, the COA could change the accreditation decision and/or impose additional stipulations with new timelines and expectations for compliance with the state adopted educator preparation standards.

Chapter Ten: Accreditation Site Visit Team Member Information

Introduction

This chapter focuses on the duties of the individuals who actually conduct accreditation visits and the principles that guide the visit. The responsibilities of team members are presented along with advice about serving in this critical role. Individuals selected for the Board of Institutional Reviewers (BIR) will have received specialized training prior to service on an accreditation team. The information presented in this handbook is designed to reinforce that formal training and to provide other interested parties with an understanding of the responsibilities and duties of accreditation team members. This Chapter provides narrative descriptions of essential team activities that occur during the actual accreditation visit and that culminate in an accreditation recommendation, which is discussed in Chapter 8. The audience is BIR members, educator preparation program sponsors, and other interested parties.

I. Purposes and Responsibilities of Accreditation Teams

Accreditation teams convene at educator preparation institutions to review the institution's documents and to interview a variety of individuals representing stakeholders to the institution's educator preparation programs. The purpose of the team's work is to provide the Committee on Accreditation with sufficient information that the COA can determine whether the educator preparation program sponsors of California fulfill adopted standards for the preparation of professional educators. Accreditation teams are expected to focus on issues of quality and effectiveness across the institution (the "unit") as well as within all credential programs. An accreditation team is expected to make its professional recommendation to the COA on the basis of the preponderance of evidence collected from multiple sources (e.g., document review, Common Standards Report, interviews across stakeholder groups, data in the biennial reports, and information from the preliminary findings of program assessment during the site visit.) Site visits include off-campus programs as well as those on the main campus. To accomplish the purpose of the accreditation teams, its members will complete the following tasks:

1. Develop a preliminary perspective on the extent to which an institution and its educator preparation programs meet the Common and program standards by reviewing: a) the institution's Common Standards Report (CSR); b) the institution's Biennial Reports and the CTC staff's responses, and c) the Program Assessment Preliminary Report of Findings (Preliminary Report) and Program Summary.
2. Collect additional information to confirm or disconfirm the preliminary perspective by: a) interviewing credential candidates, program completers, employers of program completers, field experience supervisors, program faculty, administrators, other key stakeholders; b) reviewing materials, such as course syllabi, student records, reports of follow-up studies and needs analyses; as well as any other pertinent sources of information available; and c) pursuing any questions or concerns identified by the Preliminary Report.

3. Develop consensus decision on whether the institution's education unit meets the Common Standards and whether each educator preparation program meets the appropriate program standards.
4. Develop consensus accreditation recommendation with supporting documentation to the COA. The recommendation must be one of the following: Accreditation, Accreditation with Stipulations, Accreditation with Major Stipulations, or Accreditation with Probationary Stipulations for the institution and all its credential programs. An accreditation team may recommend Denial of Accreditation if an institution has failed to make sufficient progress in addressing deficiencies identified by the COA in a previous accreditation decision.

II. Responsibilities of Accreditation Team Members

During the accreditation site visit, team members represent the COA rather than their own institutions. As such, team members should identify themselves as a member of the Accreditation team when introducing themselves to an institution's constituencies.

Review Evidence Provided in Advance.

The CTC strongly encourages institutions to use electronic sources of evidence and to provide them to reviewers in advance of the visit. It is extremely important that reviewers read these materials before the site visit and identify areas of concern to share with the rest of the team during the Sunday evening team meeting. Being prepared allows other team members to help collect information pertinent to the concerns identified and provides the reviewer more time at the site to focus on interviews and evidence available only at the site.

Read the Common Standards Report (CSR)

Forty-five to sixty days before the visit, each team member will receive a copy of the CSR. The CSR will be provided electronically and, if requested, in paper copy to any team member who so wishes. In responding to each Common standard, the self-study report should emphasize the quality of the institution's implementation of each standard and the educational rationale supporting each implementation. Typically, the CSR includes, but is not limited to, the following components:

- Letter of Transmittal by Dean
- Background of Institution and its Mission and Goals
- Education Unit Mission and Goals
- Significant Changes in Education Programs since the last visit (This section should include the findings of the previous COA accreditation team visit.)
- Institutional Response to the Common Standards
- Links or references to evidence available electronically

Further, the review team will review all documentation already submitted to the CTC related to the institution for the current accreditation cycle. This includes reviewing, for each approved program (see below):

- The Preliminary Report prepared by the Program Assessment Review Team;
- The Program Summary prepared by the Program Assessment Review Team;

- The Program Design section;
- Biennial Reports for years one, three, and five; and
- Commission Feedback to the Biennial Report.

Participate in All Team Meetings

Members of the accreditation team are expected to arrange their travel so as to arrive at the team's hotel in time for all organizational meetings. Team members are not permitted to schedule any professional or personal activities during the team visit. Throughout the duration of the visit, team members are expected to travel together, dine together, and be available for all required meetings. Team members should plan to work every evening. Finally, team members must not leave the host campus prior to the presentation of the team's report, without prior arrangement with the CTC consultant.

Team members will be assigned to focus on the unit (e.g., one or more of the Common Standards) or educator preparation programs by the team lead. If the institution has many programs, the team lead may designate a “cluster” leader who will support the work of the “cluster” of team members assigned to review programs. In general, team members will be assigned to review either the unit, teacher preparation programs (e.g., multiple subject, single subject, education specialist, adult education, etc.) or services program (e.g., education administration, pupil personnel services, etc.). Team members are expected to focus on interviews and documents that are relevant to their assigned standards or programs. As the visit progresses, team members will share what they’re learning about their assignments with the rest of the accreditation team. Accreditation teams work on a consensus basis. Team members are expected to participate throughout the visit in that spirit.

Conduct All Assigned Interviews

Team members will be assigned to a series of interviews by the team lead. Team members should review the interview schedule and may request adjustments based on that review. Any changes in the schedule must be facilitated by the team lead and the CTC consultant. The institution being accredited has gone to substantial effort to produce the requisite number of interviewees, and team members must respect that effort by conducting the interviews as scheduled. Any unusual events or problems regarding the interviews should be discussed with the team lead or the CTC consultant.

Review Appropriate Supporting Documentation

Team members will be assigned time to review documents and materials in the exhibit or document room as provided in the prepared interview schedule. All supporting documentation is the property of the institution and may not be removed from the campus by team members. Since the accreditation process calls for a recommendation based on a balanced review of all available information, team members should ensure that they are as familiar with the supporting documentation as they are with the interview data.

III. Roles of Accreditation Team Members

Team Lead

The role of a team lead during an accreditation visit to an educator preparation institution is complex and challenging. The team lead helps team members make full use of their interview and document review time; conducts the pre-visit planning meetings, the Mid-visit Status Report meeting, and the final team report presentation; and leads all deliberations and writing tasks of the team. Additionally, the team lead serves as the representative of the COA, conducts interviews, and participates in other key activities of the visit.

To function effectively as a team lead, an individual must be completely familiar with the CTC's common standards and the current CTC procedures for accreditation visits. In addition, the lead must be knowledgeable about facilitating group work and handling complex decision-making. The overall effectiveness of the accreditation process and the value it has for California institutions depends, in part, on the preparations and professionalism brought by the team lead to this critical task. Information related to the specific roles and tasks for the team lead can be found in Chapter Eleven.

Team Members

Team members are assigned to credential areas about which they have knowledge and experience. Team members are charged with the task of reviewing the education unit or programs and of making decisions about the extent to which the institution and its programs are aligned with the standards. They participate in deliberations about the quality of the institution's response to the Common Standards and reach consensus on an accreditation recommendation to the COA for the institution and all of its credential programs. Team members are expected to conduct all assigned interviews, review all documents appropriate to their assignments, familiarize themselves with any additional supporting documentation, and participate fully in all team meetings. As part of the review and reporting process, all team members have writing responsibilities during the visit.

IV. Role of Commission Staff

The CTC consultant's role begins before the site visit. The CTC consultant will typically work with an institution for about a year prior to the site visit. The focus of this work is on the logistics and preparation for the visit. The consultant likely has fielded questions from the institution about the meaning and intent of standards, state credential requirements, and various implementation issues from the programs at the site. The CTC consultant works closely with the institution on the overall visit schedule, the development of the interview schedule, and general logistics to ensure that the accreditation review team has what it needs to carry out its responsibilities once on site.

Once at the site, it is the CTC consultant's job to ensure the integrity of the accreditation process during the site visit. The consultant, with the team lead, will interact with the institution's accreditation coordinator beginning on the first day of the visit and throughout the entire visit. The consultant works to ensure that the reviewers conduct their visit under the auspices of the *Accreditation Framework*, and the standards, procedures and protocols established by the COA. The consultant serves to assist the accreditation review team by providing information and assistance to the reviewers as necessary. In particular, it is critical that the consultant keep lines of communication open between the reviewers and the institution – ensuring that the institution

has every opportunity to provide reviewers with information the reviewers need to make informed decisions. The consultant helps the team in its deliberations as well as in editing and reviewing the report.

Lastly, the CTC consultant, in collaboration with the team lead, has responsibility for presenting the report to the COA and ensuring that the Committee has accurate and timely information about the review to make their accreditation decision.

V. Preparation for an Accreditation Visit

Review Materials

The consultant should contact all team members to ensure they have received all materials and to determine if they have any questions about the visit. Team members should contact their consultant if they have questions or do not receive their materials 45 days prior to the scheduled visit.

Develop Initial Questions

Team members should read their documents carefully, making notations where they have questions or concerns or require clarification. Team members should begin to write interview questions based on documents appropriate to their assignments (e.g., the *CSR* and the Preliminary Report). The Preliminary Report will identify areas of concern identified by the Program Assessment reviewers, if any. These areas of concern may suggest interview questions or documents to review.

Travel Plans

Team members will receive instructions from the CTC consultant regarding their travel plans. Team members should make travel arrangements immediately upon receipt of the instructions, following the guidelines on arrival and departure times noted above.

Clothing

Team members should dress in a professional manner. Team members should also bring comfortable and casual clothes for evening team meetings. Most hotels now have exercise areas, so those who wish to exercise should bring appropriate clothes.

Telephone Use and Access

Although personal and professional telephone calls should be kept to an absolute minimum, team members should leave the hotel telephone number and the campus telephone number so they can be contacted in an emergency. On most accreditation visits, wireless connectivity will be available at both the institution and the hotel. Team members may bring a laptop to the visit.

Special Needs

If a team member has allergies, particular housing needs, dietary restriction, or other special needs, the CTC consultant should be contacted as soon as possible so appropriate arrangements can be made, if possible.

VI. Conflict of Interest, Professional Behavior, and Ethical Guidelines

Conflict of Interest

The COA will not appoint a team member to an accreditation team if that person has had any official prior relationship with the institution. Such relationships can include, but are not limited to, employment, application for employment, enrollment, application for admission, or any of these involving a spouse or family member. Moreover, team members have a responsibility to acknowledge any reason that would make it difficult for them to render a fair, impartial, professional judgment. If a potential team member is uncertain whether a conflict of interest exists, it is that individual's responsibility to alert the CTC consultant about the relationship so that a determination can be made. This avoids embarrassment and the possibility that a team's findings will be vacated.

The list of potential team members is sent to the institution prior to the visit. If the institution believes one or more team members may have a conflict of interest, the Administrator of Accreditation will be notified as soon as possible. The Director of the Professional Services Division of the CTC will not assign a CTC consultant to an institution if the consultant has been employed by that institution, applied for employment to that institution, been an enrolled student at the institution, or otherwise had a prior relationship that would adversely affect the visit. Finally, members of the COA are required to recuse themselves from any decisions affecting institutions with which they have any connections.

Professional Behavior

Team members are expected to act professionally at all times. Intemperate language, accusatory questions, hostile behavior, or other actions or deeds that would compromise the professional nature of the accreditation process are not permitted. Any such conduct will bring a reprimand from the team lead and possible disqualification from the BIR. As representatives of the COA, team members and the CTC consultant are expected to comport themselves with dignity, cordiality, and politeness at all times. Institutions will evaluate the performance and conduct of all team members and the evaluation will be considered in the determination of which individuals continue as members of the BIR.

Ethical Guidelines

The COA requires all team members to adhere to the highest standard of ethics during a team visit. Interviews are to be held in strict confidence. Team sessions are also confidential and are not to be shared with non-team members. The presentation of the Team Report at the Exit Meeting is public and open. The meetings of the COA must follow all public meeting laws.

VII. Team Member Skills

Team members are selected for membership in the Board of Institutional Reviewers (BIR) based on the recommendation of a colleague, knowledge of the Accreditation Framework, and demonstration of the skills necessary for a successful accreditation visit. During the BIR training, prospective members participate in activities designed to develop the skills required during a site visit and to provide feedback to CTC staff on the skill level of the prospective member. BIR

members assigned to a site visit are expected to utilize these skills during the visit and, if necessary, to request assistance or guidance from the team lead and/or the CTC consultant. Qualifications of a prospective BIR member include:

- At least three years of professional experience in education
- Experience with qualitative evaluations.
- Experience with multiple levels and different sets of education related standards.
- Personal characteristics including integrity, objectivity, empathy, ability to work under pressure, organizational ability, time management, and being a team player.
- Experience with collaboration in writing, problem solving.
- Good communication skills (both oral and written).
- Experience with data collection and analysis.
- Familiarity with technology, including the use of both MAC and PC platforms,
- Ability to access electronic information, search for pertinent information, and appropriately cite the source for inclusion in the team report.

VIII. Collecting and Analyzing Data

The accreditation team is limited to interview data collected during the visit and documentary evidence supplied by the institution or the CTC. Team members may not collect data from other sources or use anecdotal information collected outside of the visit. In order for the team to make adequate judgments about each credential program, sufficient faculty, candidates, field supervisors, and other stakeholders must be interviewed. All information from the interviews is considered private and confidential. Any data or quotes used by the team will be reported anonymously or in the aggregate. All team member notes taken during the interviews or during document reviews are the property of the COA and are collected by the CTC consultant at the end of the accreditation visit and retained by the consultant for one calendar year after the visit. Similarly, all materials placed in the documents room or electronic exhibits remain the property of the institution.

Institutions are encouraged to utilize technology (e.g., phone, video conferencing) if necessary to ensure that an adequate number of individuals representing each group can be interviewed. Similarly, the CTC is encouraging institutions to utilize electronic documents (e.g., CD-ROM or an internet website) that can be easily accessed by the visiting team members. BIR members are expected to be flexible as institutions make the transition to electronic media and communications.

All team members are required to keep a detailed record of all interviews conducted, materials reviewed, and the findings that result from the process. The CTC collects all interview materials from the team at the end of the visit and retains them in case there is an appeal to the COA.

Reading and Analyzing Documents

The initial data collection task that faces team members is reading and analyzing documents for their assignments. This is often followed by an examination and review of institutional documents that are referenced in the two documents. During the course of the accreditation visit, team members are called upon to make critical judgments about many types of documents, papers, and forms. Below are some techniques that may assist this critical, but often arduous task.

Identify the Who, What, When, and Where of each Standard

In assuring that the institution or program meets the relevant standards, it is important for the reviewers to identify the roles of the people who initiate, complete, or verify required activities. Doing so allows the reviewers to ensure the right people are being interviewed and that the correct questions are being asked. Once the key players have been identified, it is important to identify whether each individual actually performs the activities described by the institution or program in its self-study report. If a standard is met through a specific activity, a description of that activity should be noted in the self-study report so that the team can verify that statement later. Additionally, the "when and where" questions should be posed and answers noted from the self-study report if such issues are important to assuring that a particular standard is met.

Determine Relationships

It can be helpful to draw a rough chart or graph of the program or institution in terms of professional relationships and duties as identified in the various documents. Finding or creating an organizational chart can be helpful in learning how the institution or program is organized and operated.

Note Key Forms

Most programs operate using a system of forms or documents that show candidate progress through the program or institution, verify a candidate's demonstration of knowledge or skills, and record that other legal or required steps are completed. Becoming familiar with those forms and seeking them out once on campus can provide high-value data in a short time.

Look for Formulas

Many institutions operate under formulas, which determine such things as class size, supervisory ratios, admissions, and other standard operations. Finding these in the self-study report and checking on them once on campus can be helpful.

Note Generalizations and Other Vague Language

The responses to the standards should be clear and concise. The response should address "how" an institution meets a standard. It is important to follow up on language that is unclear or statements that make claims that seem to be unsupported. It may merely be unclear language; it can also point to possible areas of weakness.

Verify Claims

If an institution makes a claim in its documents, the institution must be able to verify that claim through documentation or interviews. Evidence noted in the reports should be available for the team to review. If claims are made without supporting documentation, the team lead and consultant should be informed so they can include that information in the mid-visit report. Many reports make reference to specific documents and forms; be certain that a team member has checked that these claims are accurate.

Follow Hunches and Look for Evidence to Confirm

Most team members have been around educational institutions long enough to have excellent insight. While these perceptions alone are not evidence, teams should not ignore them during the

data collection phase or even when making judgments. Insights can lead to confirming interviews and can help to sharpen the whole analysis process.

Respect Institutional Mission and Goals

Institutions and their programs are permitted to meet adopted standards in their own ways. There is not one best way of preparing educators. The team's task is to ensure that the institution or program is meeting the standards it claims it is meeting and that the institution or program is providing a quality educational experience. The exact means to this common end will, and should, vary. It may not be to team members' taste, but such variances are perfectly permissible.

Review Documents Thoroughly

Sometimes, documents look well prepared because they are fancy or reflect high quality presentation skills. The team's task is to look beyond the presentation and examine the content. Lots of "bells and whistles" do not always reflect high quality. Likewise, documents that are poorly presented may not accurately reflect the quality of the work going on at the institution. While the CTC encourages institutions to prepare high quality documents, when presented with a weak document, the reviewer may need to communicate more frequently with the team lead and CTC consultant to ensure the reviewer has sufficient information to make an informed decision about how well the standards are being addressed.

Investigate Omissions

In some cases, omission in a report can reveal a great deal about the institution or program. As documents are being reviewed, team members should ask themselves, "What is not being presented?" "What is in the background?" Familiarity with the credential area can be a great help here. Noted omissions should not lead to assumptions about institutional or program quality, but they may help focus further examination and help pose some questions.

Follow the Candidate

Try to understand what the program looks like from the perspective of a candidate entering it. What activities, what documents, what experiences are provided to the candidate or asked of the candidate? Once evidence is gathered, the team should put it all together to see whether the entire process makes sense - from admission, through coursework and fieldwork, to program completion - for a hypothetical candidate. This process might help the team identify gaps in the information presented, or it may help rectify or confirm contrary pieces of information gathered from other sources.

Interview Techniques

A critical method of obtaining sufficient data to make a determination of institutional and program quality and effectiveness is through interviewing many people with direct knowledge of the institution or program. Sufficient numbers of people from all the major constituencies related to the institution or program (faculty and administration from the institution, students in the programs, cooperating master teachers and school administrators, graduates of the programs and their employers, and advisory groups to the programs) must be interviewed carefully about their experiences with the institution and its programs in relation to the selected standards of quality. In order to maximize valuable interview time, the institution will schedule interviews with like stakeholders from the different programs team members are reviewing. For instance, a reviewer

focusing on teaching programs may interview candidates from the multiple subject, single subject, and adult education programs. At another time, that reviewer will interview district-employed supervisors from across programs. Some interviews will continue to be scheduled with individuals (e.g., department chairperson).

The information that follows is intended to help team members improve their interviewing skills and complete the review task effectively. Remember, an interview is simply a "purposeful conversation with two or more people directed by one in order to get information."

Accreditation review interviews are usually semi-structured. There is not sufficient time for a true, open-ended interview and the groups will vary enough in background and knowledge level that a structured interview is not appropriate. Reviewers should have some prepared questions in mind based on team discussions and the constituency of the person/people being interviewed. Depending on the initial responses, follow-up questions may vary significantly.

Introduction

The interview begins with introductions that include the team member's name and identifies the team member as a member of the Accreditation Team for the CTC. During the site visit, team members are not representing their own institutions, so it is not appropriate to identify those affiliations. Depending on who is being interviewed (candidates in particular), it may be necessary to provide a brief explanation of accreditation. Make sure not to make it sound like a punitive or a "gotcha" process, but rather a regular review process to ensure quality and to make recommendations for improvement, if necessary.

Explain Why You Are Interviewing Each Person

Explain the purpose of the interview and the types of questions that will be asked (the questions may vary somewhat depending on the constituency being interviewed). For instance, when interviewing master teachers, the explanation might be, "I am here to ask you some questions about the preparation of student teachers you have worked with from _____ Institution."

Reduce Anxiety

Some individuals will be anxious and a few may be reluctant to say much. Team members should be gracious and ease into the questions by asking some general questions.

Assure Confidentiality

Team members must be certain to inform interviewees that any information shared will be kept strictly confidential and that only aggregate data will be reported to the institution. This is particularly important with candidates in the program and, often, with program faculty.

Maintain a Professional Perspective

Team members must use their skills and experiences to focus directly on gathering and analyzing data to determine how well the program meets the particular standards or guidelines. They must be as objective as possible at all times and should avoid making comparisons between their institutions and the institution under review as such comments may be interpreted as demonstrating bias, even if unintended.

Confirm Understanding

It is important that reviewers confirm that they have heard and correctly understood comments made by interviewees. The interviewer can do this by paraphrasing back to the interviewee the main idea contained in the interviewees' comment. This practice encourages the interviewee to clarify something the interviewer hadn't understood correctly and to elaborate on their previous response.

Take Notes

Team members must make careful notes. This becomes particularly important when conflicting responses are received by several team members. Reviewers frequently consult their notes during the deliberations because by then, the reviewer has conducted numerous interviews and met numerous people over the course of several days at the institution, and they need to make sure they are reporting their findings accurately and completely. Document the number of responses on a specific item to identify patterns of evidence on a particular standard.

Ask Questions Related to Standards

It is important to ask questions that will help the team determine whether specific standards are met. Team members may use program planning prompts of the standards as a basis for their questions. They should focus their questions on standards the interviewee is likely to know about. For example, questions about candidate competence are most appropriate for supervising teachers, graduates of the program and their employers, while the program administrator should be a primary respondent to questions on program design

Avoid Questions That Can Be Answered "Yes" or "No"

Some simple factual questions may need to be asked. However, Yes/No type questions generally receive a one-word response. To the extent possible, word questions in a way that invites respondents to describe their experience with the issue being reviewed. .

Pursue Questions Until They Are Answered

Reviewers must listen to the answer and decide whether they are satisfied with the response. If not, they must pursue the matter further. Some answers will require an elaboration or need clarification. Reviewers should ask for specific examples of incidents or situations. Follow-up questions should focus on clarifying, amplifying, or verifying initial responses. Remember that not all interviews will yield the same amount of information. Some people do have more knowledge of an institution or its programs than others.

Do Not Accept Unsupported Conclusions

Be sure that sufficient information is gathered to substantiate any conclusions. Lines of evidence are critical and should be referenced and substantiated in the team report.

Be Aware of Time - Adhere to a Time Schedule

It is up to each team member to control the time allotted for interviews. Interviews with individuals are generally scheduled for 20 minutes while those with groups are generally scheduled for 45 minutes. Try to keep the interviews within the allotted time frame. It is

important that all team members honor the schedule prepared by the institution. It usually represents many hours of work and many individuals have made special arrangements to be present and interviewed. If there is a need to eliminate or rearrange some interviews, be sure to discuss this with the team lead and the consultant. Under no circumstances may a team member unilaterally cancel an interview. In all cases, the cancellation of interviews needs to be done with caution and after discussion with the team lead and CTC consultant.

Ask a Wrap-up Question

Most interviewees will have thought about this interview in advance and may have issues they want to mention. Invite them to do so at the end of the interview to ensure they have provided all the information they can.

Cross-Check Information

It is necessary to get information from a variety of sources, such as master teachers, public school administrators, student teaching supervisors, student teachers and graduates, and employers of graduates and then cross-check the validity of the information. This is part of the triangulation strategy discussed below.

Relate Interpretative Comments to Specific Standards

Answers are often interpretative rather than factual. Verify that the answer relates to specific program standards. Avoid accepting hearsay statements or comments that are overly vague. Remember that some interviewees will have "axes to grind." Do not allow individuals with personal issues to consume valuable reviewer time. While it might be difficult during a site visit to distinguish between those with "axes to grind" and those with legitimate concerns about a program, a reviewer must consider individual comments during an interview session in context with the totality of the evidence he or she is reviewing and with information reported by other team members.

Use Stimulated Recall

A good technique for improving responses is to use materials like the program's handbook with interviewees (e.g., candidates or master teachers) and ask questions related to its contents. Another method is to ask the person to remember a particular time in the program to sharpen their responses and enable them to be specific.

Ensure Adequate Representation from All Programs

Interviewing groups can present particular challenges not found in interviews with individuals. One challenge is ensuring that representatives from every program have the opportunity to respond to questions on every issue of importance. One method for dealing with interviewee(s) who are dominating the group interview is to acknowledge their contribution and invite others' to respond to the same prompt, e.g., "I just heard about some single subject candidates' experiences in finding student teaching positions; what is the experience like for candidates in other programs?" Another method is to invite quiet individuals to speak, e.g., "I've heard from field supervisors in education administration and school nursing but haven't heard anything from field supervisors in counseling. Can you please tell me what your experiences have been like working with school counseling candidates?"

IX. Making Decisions about Standards

As members complete the interview schedule, examine all available documents, and amass as much information as possible, the complex process of making sense out of the data and arriving at defensible decisions about each standard is unfolding. While the COA has developed statements about what constitutes a Standard as Met, Met with Concerns, and Not Met, it is the professional judgment of the team members that will determine which category the collected data best fits.

Standards Findings

For each standard the team will make one of three decisions:

Standard Met

All phrases of the standard are evident and effectively implemented.

Standard Met with Concerns

One or more phrases of the standard are not evident or are ineffectively implemented.

Standard Not Met

Significant phrases of the standard are not evident or are so ineffectively implemented that it is not possible to see the standard in the program.

In all cases where a standard is “met with concerns” or “not met,” the team will provide specific information about the deficiency and the rationale for its judgment.

To assist team members in their deliberations, a few ideas drawn from the research literature on qualitative data analysis are presented. These ideas are by no means an exhaustive list, but such information may be useful to the team as it begins the process of making decisions.

Considerations for Decision Making

Look for Patterns/Themes

By the mid-point of the site visit, team members will have listened to numerous interviews, reviewed many documents, and talked with other team members about their interviews and document notes. They will probably have identified some possible patterns or themes. The team lead will provide opportunities for members to describe what they’re thinking. Other members can provide supporting or disconfirming evidence. Questions like these can help identify patterns: “What were the most common problems mentioned?” “What phrases or words were used across most interviews?”

Cluster Responses by Constituency or by Standard.

As team members review information obtained from each constituency, the reviewers should ask whether common concerns, strengths, or weaknesses were identified. The reviewer might rank the concerns, strengths, or weaknesses by the frequency of responses to get a measure of the “weight” of such issues. Alternatively, they might want to look at each standard to see how responses cluster.

Use Metaphorical/Analogical Thinking

Some people find creating metaphors to be a useful way to bring general impressions into focus. This should be done only when most of the evidence has been reviewed so as not to cloud later data collection. A possible example is:

"If I had two words to describe this institution's attention to Standards 2 and 9, they would be _____ and _____."

Talking about metaphors that describe an institution's program can help team members' thoughts coalesce. Although all metaphors are false at some level of analysis, their use can help crystallize team members' sense of a program or standard.

Build a Logical Chain of Evidence

Team members often find that individuals from different programs independently report similar concerns or problems. The challenge to the team is to determine whether the issues reflect program findings or whether they reflect an institution-wide problem that should be registered as a Common Standard finding.

For example, at one institution, candidates, program completers, and master teachers representing multiple programs reported during interviews that candidates were often confused about what should be happening during field experiences and clinical practice. One team member verified those claims through a review of the course syllabi, which failed to reveal any evidence that field experiences were organized into a planned sequence of experiences to help candidates develop and demonstrate knowledge and skills (Common Standard 7). In talking with other team members, the member acknowledged that some candidates and program completers had indicated that they felt supported during field experiences and were confident about their abilities to function effectively in a classroom (an example of disconfirming evidence). The *CSR* indicated that these experiences were incorporated into several courses, but it was difficult to find clear evidence that sufficient planning had been done to ensure the field experiences were appropriately sequenced and that candidates were able to incorporate material from courses into their field experiences. Faculty interviews revealed that each faculty member thought others were focusing on this topic.

Here is a logical, verifiable relationship. If field experience and clinical practice turned up in interviews as a weakness across multiple programs, one would expect to find little attention paid to it in the formal curriculum. In this example, that appears to be the case: therefore, the preponderance of evidence indicates that Common Standard Seven is either 'Met with Concerns' Or 'Not Met.' If these concerns arise only in one program, the decision for the common standards would likely be 'Met,' and the program cluster team members would need to determine how to report their findings on that standard.

Triangulate and Avoid Bias

When the team has similar information from different sources about how an institution is implementing a standard, it's easier to come to consensus about the findings. Repeated evidence from believable sources helps the team make its decisions. Avoid over-emphasizing testimony from a small number of articulate, informed, or high status respondents. Avoid campus politics –

something that is inevitable even in the most positive work environment. Team members must be diligent not to impose their own values and beliefs about how educator preparation “should” be done on the data collection and analysis performed for the accreditation site visit. It can be helpful to look carefully at extreme cases where people with the most at stake reveal contrary data. This can be powerful information if it is not tainted by ulterior motives. Finally, not all data are equal. Volunteered information collected from people with low bias but high knowledge about the program can be weighted more heavily than can information from respondents with high bias but little familiarity with the program.

The team must reach consensus on the findings and recommendation.

No one individual is expected to collect and analyze data for every piece of the puzzle. Members should ask each other what they saw, heard, and read. Are they hearing the same general things? Did someone obtain information that is valuable to another member’s area of responsibility? In most cases, team members can either confirm they are seeing and hearing similar things about a program or they can provide information to fill in the blanks where other members are lacking information.

X. Writing the Team Report

The overall determination and recommendation of the team is contained in the final team report, which is written after the team has discussed all the standards. The team will discuss each standard and make a consensus determination using one of three available categories: “Met,” “Met with Concerns,” or “Not Met.” It is critical that the team’s assessment relies exclusively on evidence that was accumulated through the site visit and not on anything else. The fact that the team has evidence from a number of different constituencies (students, faculty, supervising teachers, employers, program completers, and documents) is important in making the final decision. If the team decides that a standard is “Not Met” or is “Met with Concerns,” the team must document the basis for that judgment.

Site teams are expected to use a consensus model in making decisions and teams that strive to be mutually supportive during deliberations arrive at consensus more readily. Respecting the viewpoint of all members and focusing the discussion on evidence about the institution and its programs facilitates making a decision that reflects a holistic assessment of the evidence.

The report should be written with this purpose in mind: to inform the COA about the extent to which an institution and its educator preparation programs satisfy applicable standards and to support the COA in rendering an accreditation decision. Basic declarative prose utilizing simple sentences, active verbs, and clearly defined subjects will result in a valuable report. Findings should be supported by evidence collected by the team during the visit. The report should contain specific comments about the group's judgments of program quality, strengths or deficiencies, and suggestions for improvement. The team lead will edit the final draft of all report sections for clarity, smoothness, and uniformity.

Chapter Eight provides guidance to teams about how to determine whether the standards findings suggest a recommendation for “Accreditation,” “Accreditation with Stipulations,” “Accreditation with Major Stipulations,” or “Denial of Accreditation.”

X. Concluding the Visit

When the report is finished and ready for presentation, team members should prepare to return home. Prior to departure, team members must complete expense forms and evaluation forms. The expense form allows the state to reimburse the team members for out-of-pocket expenses associated with the site visit. The evaluation form is part of the accreditation system's on-going improvement process as described in Chapter Thirteen. The CTC consultant will collect interview notes and any other documentation that was generated during the site visit.

The CTC follows state administrative guidelines for reimbursing individuals. As required by different team members, the CTC will purchase airline tickets or reimburse for mileage at state rates. The agency will directly pay the hotel bill. In addition, the CTC will pay *per diem* expenses for meals and incidentals in accordance with state policy. The consultant assigned to the accreditation team is responsible to review details with the team. Any expenses beyond those specified in state regulations will not be covered. If a team member's district requires a substitute during the site visit, the CTC will pay for that substitute when billed by the district.

Concluding Activities and Team Report

The presentation of the team report is typically held during the late morning or early afternoon of the last day of the team visit. The team report is duplicated for each team member, and for program faculty and administration members as determined by the Dean or Director. If possible, time will be allotted so that the institution's administration can read the team report prior to the meeting. The format of this meeting is an oral presentation of the team report by the team lead. Typically, the team lead summarizes the report and discusses the rationale for the accreditation recommendation. On occasion, the team lead may invite comments from team members. This is not a time for the institution to debate the recommendation, submit new data, or discuss the team's judgment.

In the case of a merged NCATE/COA visit, the institution's Dean or Director determines whether team findings that apply to NCATE standards will be shared with the entire faculty of the institution. The NCATE report is prepared and submitted to the Unit Accreditation Board in accordance with NCATE policy. The institution prepares its rejoinder as described in NCATE policy. The decision of the NCATE Unit Accreditation Board will be made separately from the decision of the COA. Merged visits are discussed in Chapter Twelve.

The accreditation team report may be edited for publication in the COA agenda, but its substance will not be changed. The report will be posted on the CTC website as part of the COA agenda. The final copy of the report, as it will appear when presented to the COA for its review and final decision, will be sent to the institution and team lead prior to the date of the COA meeting.

Evaluation of Accreditation Process and Personnel

The CTC provides team members with an evaluation instrument that covers all aspects of the visit, ranging from the initial contact through the report presentation. The instrument contains both multiple-choice and open-ended questions, and requests recommendations for improving the accreditation process. To assist in the quality of the BIR, the Dean or Director also receives

forms for evaluating each member of the accreditation team. These data will be considered by the Executive Director of the CTC when decisions are made regarding retention of individuals on the BIR and identification of individuals able to assume the role of cluster leader and/or team lead. If the institution has concerns about the performance of the CTC consultant, the Director of the Professional Services Division of the CTC should be contacted.

Final Note

The accreditation team's responsibilities and workload may seem overwhelming when put into print, but the collective experiences of hundreds of professional educators suggests that participation in a COA accreditation visit is a tremendously valuable professional development activity. Working with fellow educators on a matter of signal importance that will improve the profession is a marvelous way to spend several days. The team approach provides both camaraderie and support as the team makes its decisions. The CTC consultant will be on hand to provide additional assistance. Team members expand their knowledge, make new friends, and return to their regular post invigorated by the experience.